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THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

PATENT  
Total Pages \_\_\_\_\_

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: James L. McMenimen, Christopher J. Campbell, Willa M. Fabian, Barbara K. Ruble, Larry G. Clark, David L. Thompson  
TITLE: RESPONSIVE MANUFACTURING AND INVENTORY CONTROL

3C970 U.S. PTO



02/01/01

Assistant Commissioner for Patents  
BOX PATENT APPLICATION  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EL752209164US, on this 1st day of FEBRUARY, 2001.

FRAYDA M. NITSCHKE

Printed Name

Signature

3C970 U.S. PTO  
09/775281  
02/01/01

Sir:

We are transmitting herewith the attached:

X Patent Application Transmittal

X Specification:

Total pages: 25 (including claims and abstract: Spec. 21 sheets; Claims 3 sheets; Abstract - 1

X Drawings:

Total sheets: 4

☐ formal ☒ informal

X Combined Declaration and Power of Attorney: (UNSIGNED)

- ☐ newly executed  
☐ copy from prior application  
☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
X Incorporation by Reference - The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

X Accompanying application parts:

- ☐ Notification of filing a  
☐ Assignment of the Invention to Medtronic, Inc.  
☐ Assignment cover sheet  
☐ Information Disclosure Statement  
☐ PTO Form 1449  
☐ Copies of IDS citations  
☐ Preliminary Amendment  
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
X Return Postcard

IF A CONTINUING APPLICATION:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)  
of prior application No. \_\_\_\_\_  
☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation  
☐ division ☐ continuation in part of application number \_\_\_\_\_, filed \_\_\_\_\_.  
☐ Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee.  
(At least the original independent claim must be retained for filing purposes.)  
☐ The prior application is assigned of record to Medtronic, Inc.  
☐ The Power of Attorney in the prior application is to: GIRMA WOLDE-MICHAEL

X This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/180,289, filed FEBRUARY 4, 2000.

X Address all future correspondence to: GIRMA WOLDE-MICHAEL, Reg. No. 36,724  
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FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	8	20	= 0	x 18	0
Independent Claims	3	3	= 0	x 80	0
Multiple Dependent Claims	0			+ 270	0
Basic Filing Fee					710
TOTAL					710

X Charge Deposit Account No. 13-2546 the sum of \$710.00 (Filing Fee) for a total of \$710.00.

X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546.. A duplicate of this transmittal is enclosed.

02/01/2001  
Date

  
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